No. 1(2)/EV/2008 Government of India Ministry of Finance Department of Expenditure

New Delhi, the 17th of August, 2009

OFFICE MEMORANDUM

Subject: - Implementation of New Pension Scheme – Pre-condition for release of 2nd installment of arrears of 6th CPC recommendations.

Reference is invited to this Department's earlier Office Memorandums regarding implementation of New Pension Scheme. The progress of implementation of NPS has been reviewed and the following action needs to be taken up immediately.

- i. It has been intimated by NSDL that in a large number of cases pertaining to post 01-01-2004 entrants into Government service, the individual application forms for registration to the NPS have not been filled up and sent to them. It is therefore, advised that all employees under the administrative control of your Ministry/Department who are covered under NPS may be asked to fill up the enclosed form which may then be forwarded by DDO/PAO to NSDL immediately (latest by 31st August, 2009) if this has not already been done. Action in this regard will need to be completed before release of second installment of arrears for which separate orders will be issued. It may be noted that release of the 2nd installment, for post 1/1/2004 entrants, will be subject to the above action being completed.
- ii. Further, the review has brought out that there are cases where the CDDOs/PAOs have not uploaded contribution files or (b) regular monthly credits have not been posted in the IRA or (c) there is mismatch of contribution. NSDL has been asked to forward PAO/DDO wise subscriber details which will become available to CDDOs/PAOs by the end of August, 2009.Suitable instructions may be issued to all the PAOs/CDDOs to verify the details/confirm contribution/Fund Transfer circulated by NSDL. Action as prescribed by NSDL/PFRDA while circulating these details (underlying action for missing credits) may be completed positively by 30th September, 2009.

(Manoj Sahay) Director (A)

To All FAs/CCAs

Annexure S1		Page 1
Application for Allotment of	Permanent Retirement Account Number (PRAN)	
(To avoid mistake(s), please follow the according	ompanying instructions and examples carefully before filling up the form)	
Acknowledgement No.		To affix recent Coloured photograph
(To be filled by FC)		$(3.5 \text{ cm} \times 2.5 \text{ cm})$
Permanent Retirement Account Number: (To be filled by FC after PRAN generation		
Sir/Madam,		
I hereby request that a permanent retirement	account number he elletted to me	
I give below necessary particulars:	account number be another to me.	
		Cignothum /
Section A - Subscribers Personal l Full Name (Full expanded name: initials are	Details (* Indicates Mandatory Field)	Signature/Left Thumb Impression of Subscriber in black ink
Please Tick as applicable, Shri First Name *	Smt . Kumari	
Middle Name		
Last Name		
Last Hame		
Gender * Please Tick as applicable, M	ale Female	
Date of Birth *	4. PAN	
D D M M	Y Y Y Y (Date of Birth to be Certified by DDO)	
Father's Full Name: First Name *	1 1 (Date of Bitti to be Certified by DDO)	
Middle Name		
Last Name		
Present Address:		
Flat/Unit No, Block no. *		
Name of Premise/Building/Village		
Area/Locality/Taluka		
District/Town/City *		
State / Union Territory *		
Country *		
20unuy		
Pin Code *		
Permanent Address: If same as above, Please Flat/Unit No, Block no. *	Tick else,	
Name of Premise/Building/Village		
Area/Locality/Taluka		
District/Town/City *		
tate / Union Territory *		
Country *		
Pin Code *		
Phone No. STD Code	Plan V	
Mobile No.	Phone No.	
		

Annexure S1	Page 2			
10. Email ID				
11. Subscribers Bank Details: (Please refer instruction no. 4) Bank A/c Number Current A/c				
Bank Name				
Bank Branch				
Bank Address				
Dank Addiess				
Pin Code Pin Code				
Bank MICR Code (Wherever applicable)				
12. Value Added Services: i) SMS Alert Yes No				
ii) Email Alert: Yes No				
I, the applicant, do hereby declare that what is stated above is true to the best of my information & belief.				
Date :				
D D M M Y Y Y Y				
	Signature/Left Thumb Impression of Subscriber			
Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory	y)			
1. Date of Joining 2. Date of Retirement				
D D M M Y Y Y Y D D	ммүүүү			
3. PPAN (Please refer to instructions No.5.)				
4. Group of the Employee (Please Tick) Group A Group B Group C Group D				
5. Office				
6. Department				
o. bepartment				
7. Ministry				
8. DDO Registration Number				
6. DDO Registration Number 9. PAO/CDDO Registration Number (Please refer to instructions No.6.)				
10. Basic Salary				
11. Pay Scale				
Tay seate				
Certified that the above declaration has been signed / thumb impressed before me by after he / she has read the entries / entries have been read over to him / her by me and got confirmed by him / her. Also certified that the date of birth and employment details is as per employee records available with the Department .				
details is as per employee records available with the Department .	uie date or pirth and employment			
Signature of the Authorised Person Rubber Stamp of the I	DDO			
Designation of the Authorised Person :				
D D M M Y Y Y Y Department / Ministry				

Annexure S1		Page 3		
Section C - Subscriber's Nomination	Details (* Indicates Mandatory Field for nominee)			
Name of the Nominee *: 1st Nominee	2nd Nominee	ad Manaina		
First Name *	First Name * First Name *	rd Nominee		
	This Name			
		┟ ═╏┈╏╸╏┈╏╸╏		
Middle Name	Middle Name Middle Name			
Last Name				
Last Ivaine	Last Name Last Name			
2. Date of Birth (In case of a minor)*: 1st Nominee	2nd Nominee 3rd Nominee			
3. Relationship with the Nominee*:	Jid Nonninee			
1st Nominee	2nd Nominee 3rd Nominee			
	Sid Nothinee			
4. Percentage Share *:				
1st Nominee	2nd Nominee % 3rd Nominee			
5. Nominee's Guardian Details (in case of a minor)*:				
1st Nominee's Guardian Details	2nd Nominee's Guardian Details 3rd Nominee's Guar			
First Name *	TO ANY A	dian Details		
	First Name * First Name *			
	┃ ┃ 	╾╀┼┼┼┼┼┼┼┼┼		
Middle Name	Middle Name Middle Name			
				
Lost Name				
Last Name	Last Name Last Name			
╽┝╶╅┈┼╒╃╶╅┈╏ ╌╃ ╶╏┈╏				
6. Conditions rendering nomination invalid:				
1st Nominee	2nd Nominee 3rd Nominee			
Section D. Selection C. L. D. C.				
Section D - Subscriber Scheme Details				
1st Scheme	2nd Scheme 3rd Scheme			
Pension Fund Managers Name/Code	Ju Schene	fanagers Name/Code		
	Tension rund W	lanagers Name/Code		
		╸ ┼╶┼┈┼┈┼┈┼┈┼┈┦╽		
Scheme ID No./Name	Scheme ID No./Name Scheme ID No./	Name		
Percentage Share				
Tercentage share	Percentage Share Percentage Share	e		
Cardian E. Dad.				
Section E - Declaration				
T 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				
I understand that there would be PFRDA	approved Terms and Conditions for Subscribers on the C	RA website governing I-		
I III (10 ILCCESS CICA) NIFISCAN UNU VIEW	(letitles) & I-Din I goree to be bound by the said torms and a	andidiana and the t		
mat Citch may, as approved by PFI	RDA, amend any of the services completely or part	tially without any new		
Declaration/Undertaking being signed.				
I	, the applicant, do hereby declare that			
what is stated above is true to the best of my information & belief.				
Date:	_			
D D M M Y Y Y Y	,			
		Signature/Left Thumb		
		Impression of Subscriber		

INSTRUCTIONS FOR FILLING PRAN FORM

- Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- Details Marked with (*) are the mandatory fields. b)
- Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- 'Individual' Subscriber should affix a recent colour photograph (size 3.5 cm x 2.5 cm) in the space provided on the form. The photograph should not d) be stapled or clipped to the form. (The clarity of image on PRAN card will depend on the quality and clarity of photograph affixed on the form.)
- Signature /Left thumb impression should only be within the box provided in the form. The signature should not be on the photograph. If there is any mark on the photograph such that it hinders the clear visibility of the face of the Subscriber, the application will not be accepted.
- Thumb impression, if used, should be attested by a Magistrate or a Notary Public or a Gazetted Officer under official seal and stamp.

Sr.	Item No	Item Details	Guidelines for Filling the Form		
No. Section A - Subscribers Personal Details Section A - Subscribers Personal Details					
1	3.	Date of Birth	All Dates Should be in "DDMMYYYY" Format		
2	6.	Present Address	All future communications will be sent to present address.		
3	8, 9, 10	Phone No., Mobile No, & Email ID	It is advisable to mention either "Telephone number" or "Mobile number" or "Email id" so that Subscriber can be contacted in future for any discrepancy.		
4	11	Subscriber's Bank Details	If Subscribers mentions any of the bank details, except MICR Code all the bank details will be mandatory.		
		Section 1	B - Subscribers Employment Details		
It is mandatory to fill the Subscriber's Employment details in the application. The employment details should be filled by the respective DDO of the Subscriber and should be verified by the Authorised Signatory. DDO should ratify Overwriting / Striking off of any of the employment details.					
5	3.	PPAN	Kindly provide the PPAN (Permanent Pension Account Number), if it has been allotted to the subscriber by the concerned PAO.		
6	8 & 9	PAO/CDDO Reg. No. & DDO Reg. No.	PAO/CDDO Reg. No. and DDO Reg. No. are the unique Registration number allotted by Central Recordkeeping Agency. CDDOs will register as both PAOs and DDOs. NCDDOs will register only as DDOs and obtain the PAO Reg. No. from their respective PAOs.		
		Section (C - Subscriber's Nomination Details		
7	4.	Percentage Share	Subscriber can nominate maximum of three nominees. Subscriber can not fill the same nominee details more than once. Percentage share value for all the nominees must be integer. Fractional value will not be accepted. Sum of percentage share across all the nominees must be equal to 100. If sum of percentage is not equal to 100, entire nomination will be rejected.		
8	5.	Nominee's Guardian Details	If a nominee is a minor, then nominee's guardian details will be mandatory.		
If the	Section D - Subscriber scheme details If the Subscriber is unable to mention the Scheme details i.e. PFM Name, Scheme Name & Percentage Allocation he can contact the nearest Facilitation Centre (FC) for information or the Subscriber can also correct for the scheme details.				
9	If a scheme name is filled in the form for scheme setup there must be a PFM name and percentage contribution filled for that scheme. If the Scheme details are not filled, default scheme as approved by PFRDA will be applicable.				
10	Percentage Share Scheme Contribution Value will be in terms of percentage. It cannot be in terms of amount. Percentage contribution value for all the schemes must be integer. Fractional value will not be accepted. If the sum of contributions (in percentage) across all the schemes is not equal to 100, the balance will be allotted to the default scheme approved by PFRDA.				

GENERAL INFORMATION FOR PRAN SUBSCRIBERS

- Subscribers can obtain the application form for PRAN in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) from DDO or can freely download from the CRA website (http://www.npscra.nsdl.co.in).
- The request for a reprint of PRAN card with the same PRAN details or/and changes or correction in PRAN data can be made by filling up 'Request for change/correction in subscriber master details and/or re-issue of I-Pin/T-Pin/PRAN card' or/and 'Request For change in signature and/or change in photograph'. The form is available from the sources mentioned in (a) above.
- The Subscriber can obtain the status of his/her application from the CRA website or through the respective PAO/CDDO.
- For more information

Visit us at http://www.npscra.nsdl.co.in

Call us at 022-24994200

e-mail us at info.cra@nsdl.co.in

Write to: Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.